

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		3/7/11
OLP.E. CLASSIFIER		59	9/12
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	59322	10-12-11

✓ \_\_\_\_\_ Rejected      H \_\_\_\_\_ Non-accepted  
 = \_\_\_\_\_ Allowed      I \_\_\_\_\_ Interference  
 - (Through column) \_\_\_\_\_ Checked      A \_\_\_\_\_ Appeal  
 + \_\_\_\_\_ Restricted      O \_\_\_\_\_ Objected

Row	Col	Row	Col	Row	Col
1	1	1	1	1	1
1	2	1	2	1	2
1	3	1	3	1	3
1	4	1	4	1	4
1	5	1	5	1	5
1	6	1	6	1	6
1	7	1	7	1	7
1	8	1	8	1	8
1	9	1	9	1	9
1	10	1	10	1	10
1	11	1	11	1	11
1	12	1	12	1	12
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1	49	1	49	1	49
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2	38	2	38	2	38
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2	40	2	40	2	40
2	41	2	41	2	41
2	42	2	42	2	42
2	43	2	43	2	4

If more than 150 claims or 10 actions  
 . staple additional sheet here

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